



REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☐ No

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name
LINDA GAYE CORDELL for FISHERS CLERK-TREASURER

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number
(317) 849-0469

4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address
7075 KOLDYKE DRIVE

5. City, State, ZIP Code
FISHERS, IN 46038

6. Party Affiliation (if applicable)
REPUBLICAN

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)
LINDA GAYE CORDELL

8. Party Affiliation or If Independent Candidate
REPUBLICAN

9. Office Sought (Include district number, if any. Not required for exploratory committee.)
FISHERS CLERK-TREASURER

10. County of Residence
HAMILTON

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11. Check one:
☒ Pre-Primary ☐ Pre-Election ☐ Annual ☐ Nomination ☐ Other
☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting Period:
From: **JAN 1, 2011** Through: **APRIL 8, 2011**

COLUMN A
This Period

COLUMN B
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

14848.54

14. Cash on hand and investments January 1, current year.

14848.54

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)	17267.00	17267.00
15b. Unitemized	1.83	1.83
15c. Add lines 15a and 15b in both columns	17268.83	17268.83
SUBTOTAL	17268.83	17268.83
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	32117.37	32117.37
TOTAL	32117.37	32117.37

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	11304.58	11304.58
17b. Unitemized	0	0
17c. Add lines 17a and 17b in both columns	11304.58	11304.58
SUBTOTAL	11304.58	11304.58
17c. Add lines 17a and 17b in both columns	20812.79	20812.79
TOTAL	20812.79	20812.79
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	0	0
19. Debts OWED BY the committee (use Schedule D)	0	0
20. Debts OWED TO the committee (use Schedule E)	0	0

I DECLARE AND BELIEVE IT IS TRUE, CORRECT AND COMPLETE.

TREASURER

Date **4/12/11**

Date **4/12/11**

for any commercial purpose. (IC 3-9-4-5) A person who knowingly
s to file a complete or accurate report as required by the Indiana
subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

62:16:47 81:24:1102

FILED



INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 1 of 1

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. ROBERT W. CRISCI 11170 VINEYARD DR FISHERS, IN 46038 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	\$250.00	250.00	3/29/11 LINDA GAYE CORDELL
2. Contributor's Occupation (if required)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
3. Contributor's Occupation (if required)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
4. Contributor's Occupation (if required)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
5. Contributor's Occupation (if required)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 250.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ 250.00		



REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4)
CONTRIBUTIONS BY
POLITICAL ACTION COMMITTEES
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page 1 of 2

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	12,000.00	12,000.00	3/29/11 LINDA GAYE CORDELL
2. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) CONTRIBUTION Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	375.00	12,375.00	4/28/11 HSE SCHOOL FOUNDATION
3. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) OPENING DAY TABLE Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	50.00	12425.00	3/4/11 HSE SPORTS
4. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) ADS Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	2322.25	14747.25	3/4/11 CURRENT PUBLISHING
5. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) BASEBALLS Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	1179.68	15926.93	3/21/11 EM-ROE
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 15926.93		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



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(CFA-4 SCHEDULE A-4)
CONTRIBUTIONS BY
POLITICAL ACTION COMMITTEES
Itemized Contributions and Other Receipts

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FILE NUMBER

Page 2 of 2

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) SPONSORSHIP Other Receipts: <u>LINCOLN DAY</u> <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	300.00	16,226.93	3/28/11 HAMILTON COUNTY REPUBLICAN PARTY
2. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46037	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) T-SHIRTS Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	352.57	16,579.50	3/30/11 T & T SALES & PROMOTIONS
3. FUTURE OF FISHERS 11128 ROCKINGHAM CIRCLE FISHERS, IN 46038	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) DESIGN WORK Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)	437.50	17,017.00	3/31/11 LINDSAY HADLEY DESIGN
4.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify)			
SUBTOTAL THIS PAGE OF SCHEDULE A		\$ 1090.07		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ 17,017.00		



REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page 1 of 3

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)				
Code <u>A</u> JERRY GOLDBERG PHOTOGRAPHY 11650 LANTERN RD #113 FISHERS, IN 46038	DAVID COHEN	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: PHOTOGRAPHY	53.45	53.45	2/25/11
Code <u>A</u> HARCOURT INDUSTRIES 7765 S. 175 W PO BOX 128 MILROY, IN 46156	JEAN ANN HARCOURT	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: YARD SIGNS	2029.36	2082.21 2082.21	3/21/11
Code <u>0</u> BEST Buy #229 INDPLS, IN 46250		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: OFFICE EQUIPMENT	258.91	2341.72 2082.21	2/28/11
Code <u>0</u> FRY'S ELECTRONICS #43 9820 KINCAID DRIVE FISHERS, IN 46038		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: OFFICE EQUIPMENT	797.12	2082.21 3138.84	2/23/11
Code <u>0</u> VERIZON WIRELESS 6633 E 82nd ST INDPLS, IN 46250		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: OFFICE EQUIPMENT	200.59	2082.21 3339.43	3/9/11
Code <u>A</u> INDPLS STAR 307 N. PENNSYLVANIA INDPLS, IN 46204		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: AD	2469.00	2082.21 5808.43	3/30/11
Code <u>EO</u> FISHERS RETAIL STORE # 46038 9998 POST OFFICE FISHERS, IN 46038		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: POSTAGE	35.20	2082.21 5843.63	3/30/11
SUBTOTAL THIS PAGE OF SCHEDULE B			\$5843.63		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



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(CFA-4 SCHEDULE B)
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Page 2 of 3

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>A</u> HARCOURT INDUSTRIES 7765 S. 175 W P.O. BOX 128 MILROD, IN 46156	JEAN ANN HARCOURT	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: STICKERS	104.89	5948.52	3/28/11
Code <u>O</u> VERIZON WIRELESS 6633 E. 82ND ST INDPLS, IN 46250		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: OFFICE EQUIPMENT	24.06	5972.58	3/23/11
Code <u>A</u> KEN BARLOW 3230 ARUNDEL LANE INDPLS, IN 46222	KEN BARLOW	<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: WEBSITE	315.00	6287.58	4/4/11
Code <u>C</u> HSE SCHOOL FOUNDATION 13485 CUMBERLAND RD FISHERS, IN 46038		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: CONTRIBUTION	375.00	6662.58	2/28/11
Code <u>A</u> HSE SPORTS 12690 Promise Rd FISHERS, IN 46038		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: OPENING DAY TABLE	50.00	6712.58	3/4/11
Code <u>A</u> CURRENT PUBLISHING 1 SOUTH RANGELINE RD #220 CARMEL, IN 46032		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: ADS	2322.25	9034.83	3/4/11
Code <u>A</u> EM-ROE 7920 GEORGETOWN RD #800 INDPLS, IN 46268		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: BASEBALLS	1179.68	10214.51	3/21/11
SUBTOTAL THIS PAGE OF SCHEDULE B			\$4370.88		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



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Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

Page 3 of 3

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>C</u> HAMILTON COUNTY REPUBLICAN PARTY 7246 FISHERS CROSSING DR FISHERS, IN 46038		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: <u>LINCOLN DAY</u> <u>SPONSORSHIP</u>	300.00	10514.51	3/28/11
Code <u>A</u> T+T SALES + PROMOTIONS 15320 HERRIMAN BLVD NOBLESVILLE, IN 46060		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: <u>T-SHIRTS</u>	352.57	10867.08	3/30/11
Code <u>A</u> LINDSAY HADLEY DESIGN 6401 N. RURAL ST. INDPLS, IN 46220		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: <u>DESIGN WORK</u>	437.50	11304.58	3/31/11
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: _____			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$1090.07		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$11304.58		